

REMARKS OF  
JOSEFINA CARBONELL  
ASSISTANT SECRETARY FOR AGING  
ADMINISTRATION ON AGING  
  
TO THE  
  
MARYLAND GOVERNOR'S CONFERENCE ON VITAL AGING  
  
"BUILDING ON OUR ACCOMPLISHMENTS  
TO  
SHAPE A BETTER FUTURE FOR OLDER ADULTS"  
  
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This text is the basis of the oral remarks of the Assistant Secretary for Aging. It should be used with the understanding that some material may be added or omitted.

## **Introductory Remarks**

- Good afternoon! It's a pleasure to be with you this afternoon at the Maryland Governor's Conference on Aging.
- I want to thank the Maryland Department of Aging and their conference co-sponsors for inviting me to speak with you today.
- I also want to commend Secretary Roesser for her tireless work on behalf of the older citizens of Maryland.
- Today I want to talk about the many accomplishments of the Aging Services Network and my vision for the future for older Americans.
- There are many challenges ahead of us, but I believe these challenges present us with new opportunities for creating a better America for older adults and their caregivers.

## **Work in Progress**

- We have accomplished a great deal since the passage of the Older Americans Act.
- We have created a nationwide infrastructure—the Aging Services Network—that is grounded in the core values of individual dignity and independence.
- We have built the foundation of this nation’s formal system of home and community based services.
- We are key partners with other Federal, state, local and private entities that serve older people.

## **Medicare**

- Today we have the opportunity to play a key role in the modernization of Medicare, which is perhaps the greatest contribution this country has made to its older citizens.
- The Medicare Modernization Act provides prescription drug coverage to Medicare beneficiaries and offers better prevention services and health benefits.
- In Maryland alone, there are 675,000 beneficiaries. 116,000 of those are eligible for \$1200 Transitional Assistance. By making sure that beneficiaries are able to access this assistance, you are providing critical health coverage and saving them money. But this also translates into a potential savings of \$139 million for the state of Maryland.
- We know that beneficiaries have a lot of choices to make. Our job is to make sure that beneficiaries have the resources they need to make the best choice, both now, and in 2006 when the full drug benefit takes effect.

- That's why Secretary Thompson has awarded \$62.5 million to 21 states – including Maryland, which received \$1.7 million – to help educate low-income Medicare beneficiaries who currently get their prescription drugs through state funded programs about the drug benefit that will take effect in 2006.
- That's also why AoA is partnering with CMS, the Access to Benefits Coalition and other public and private organizations to support community level efforts to educate and enroll low-income Medicare beneficiaries in the drug discount card program.
- AoA and CMS announced last month the award of 121 contracts – totaling nearly \$4 million – to AAAs and community-based organizations as part of our Medicare-Approved Drug Discount Card Outreach Campaign to provide outreach, education and enrollment activities to low-income and underserved beneficiaries.

- I am pleased that the Baltimore City AAA and the Choptank Community Health System in Denton are helping us in this endeavor.
- We are providing support to the National Association of Area Agencies on Aging and the National Association of State Units on Aging as well as four national minority organizations to enhance their ability to support the Aging Services Network in this effort.
- We are also working closely with CMS through the 57 Senior Medicare Patrol projects to assist Medicare/Medicaid beneficiaries and their families to become better health care consumers.
- The MMA requires that SMPs educate seniors early to spot false claims and to be aware that Medicare-approved cards and marketing materials must bear the CMS drug care service mark.
- I am proud to have awarded \$175,000 to Maryland to continue these efforts.

- The Medicare Modernization Act provides the Aging Network the opportunity to demonstrate the significant role we play in quickly and effectively empowering older Americans to make informed choices on matters of importance - and what is more important than health care!
- This is just one of many opportunities that demonstrate the important added value our network brings to our health and long term care system.

## **Innovations**

- Another is the Aging and Disability Resource Center initiative. We are serving as the front-end entry point for the entire system of care. 24 states – including Maryland - have now received Aging and Disability Resource Center grants to develop streamlined access to long-term care for people with disabilities of all ages.

- In nearly all of those states, the State Unit on Aging has taken the lead and is working with Area Agencies on Aging to pilot their Resource Center programs. Maryland's resource centers, located in Howard and Worcester (pronounced WOOSTER) counties, are outstanding examples of how these partnerships can improve access to services for both urban and rural populations.
- We are also keeping older people healthy longer and assisting them in their efforts to stay engaged in community life.
- With our Evidence-Based Prevention Program, we are taking health promotion and disease prevention to a new level and positioning the network as a nationwide vehicle for translating research into practice.

- We are working with the Centers for Disease Control, the National Institute on Aging, the Agency for Health Care Research and Quality, the nation's leading foundations, and a group of 12 area agencies on aging and local service providers to demonstrate that our network can effectively deliver programs that have proven to be effective in reducing the risk of disease and disability among the elderly.
- Together with our partners we have also recently announced that 10 states will be funded to send a team of state and local agency staff from both the aging and health networks to a training program designed to help them implement evidence-based disease prevention programs for the elderly at the community level.
- 45 states submitted applications to attend the Evidence-Based Disability and Disease Prevention for Elders workshop. Because of that interest we are working with our partners to identify the resources to offer this training again so that others may participate.

- I hope by now you have all heard about the *You Can! Steps to Healthier Aging Campaign*.
- Partner enrollment in the campaign began the first of September and we have already enrolled over 1,000 partners across the country. If you haven't already enrolled please visit our web site at [www.aoa.gov](http://www.aoa.gov) for more information and to enroll.
- Our Network is also taking the lead in developing excellent models of coordinated and integrated health and social supports that have improved access to community-based options for older Americans.
- As this approach to providing care continues to evolve, we must look at strategic opportunities for the aging network in this arena.

- For example, I recently awarded 14 grants to AAAs and community organizations to support partnerships with managed care organizations and/or capitated financing arrangements that improve the quality of care for older people. I am proud that one of those was to the City of Baltimore, which will be working with the University of Maryland School of Pharmacy and Elder Health Maryland HMO to improve post-hospital discharge support services.
- And while we launch these vibrant new initiatives, we know you are out there serving older people who need care to remain in the community.
- This year, like last year, the Aging Services Network is serving nearly 8 million seniors, over 3 million of whom have intensive care needs.
- Through the National Family Caregiver Support Program, the Network is reaching out to over 8 million family members and is providing vital access other services to over 500,000 caregivers.

- In Maryland, you reached out to almost 35,000 people, and provided direct services to almost 12,000 caregivers.
- Together we are strengthening America's families and we are keeping impaired older people in their homes and communities.

### **Creating Opportunities**

- As we look to the future, we will move steadfast in our efforts to create a better America for aging citizens, particularly the challenge afforded by the aging "baby boom."
- I am a firm believer that the baby boomers will be part of the solution. They will demand results and we are poised to deliver!
- You all know that my vision for long-term care is to have a system in place in every community that provides a meaningful range of service options to older adults and their family members.

- To realize this vision, we have a mission for AoA and the Aging Network that is focused on those we serve. 1) We will develop comprehensive and coordinated systems of care for all Americans 60 years of age and older, and 2) we will help the nation prepare for the baby boom generation.
- Because of you and your colleagues, the groundwork for these efforts is already in place. We have a strong service delivery infrastructure that covers the entire country, and we have a robust history of innovation in health and long-term care.
- The initiatives I noted reflect that we have already taken a strong step toward innovation in long-term care. With these and initiatives like them, we will make our vision of long-term living for older people a reality.
- We all must continue to play a leadership role in helping our nation respond to the needs of the older population. And we can't just do it in Washington. We need to do it in state houses, in county and city halls, and in corporate boardrooms and small businesses.

- If we are going to retain our leadership position in the future, we must demonstrate AND DOCUMENT the value we are adding to improving health and the quality of independent living, and do it in a language that inspires funders and policymakers to invest in our Network.
- We must do a better job of demonstrating the cost efficiencies we can achieve in providing quality services. We must produce and measure results.
- We must ground all of our programs and services in the best science available.
- We need to carve out a clear role for the aging services network in a managed care environment.
- As we move forward to meet these challenges, we must never lose sight of our primary mission and core values that are inherent in the Older Americans Act.

- If we can keep our focus on the consumer and the changing needs of our local community – I am confident the Aging Services Network will not only meet the challenges of today, but for the future as well.